

|  |  |   |   |
|--|--|---|---|
| FORM PTO-875<br>(REV. 1-86)                            | U.S. DEPARTMENT OF COMMERCE<br>PATENT AND TRADEMARK OFFICE | SERIAL NO.<br><div style="font-size: 1.5em; font-family: cursive;">047614</div>                         | FILING DATE<br><div style="font-size: 1.5em; font-family: cursive;">May 8, 1987</div> |
| <b>PATENT APPLICATION FEE DETERMINATION<br/>RECORD</b> |  | APPLICANT (FIRST NAMED)<br><div style="font-size: 1.5em; font-family: cursive;">Scott M. Rocklage</div> |   |

### CLAIMS AS FILED - PART I

| FOR:  | NO. FILED | NO. EXTRA |
|---|-----------|-----------|
| BASIC FEE   |           |           |
| TOTAL CLAIMS  | 279 -20-  | 259       |
| INDEP. CLAIMS   | 3 -3-     | 0         |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT |           |           |

\* If the difference in col. 1 is less than zero, enter "0" in col. 2

#### SMALL ENTITY

| RATE         | FEE           |
|--------------|---------------|
|              | \$170         |
| X6=          | \$1554        |
| X17=         | \$            |
| X55=         | \$55          |
| <b>TOTAL</b> | <b>\$1779</b> |

#### OTHER THAN A SMALL ENTITY

| RATE         | FEE       |
|--------------|-----------|
|              | \$340     |
| X12=         | \$        |
| X34=         | \$        |
| X110=        | \$        |
| <b>TOTAL</b> | <b>\$</b> |

### CLAIMS AS AMENDED - PART II

|                    | (1)  | (2)                                   | (3)              |
|--------------------|--|---------------------------------------|------------------|
| <b>AMENDMENT A</b> | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                          | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|                    | TOTAL  | MINUS                                 | =                |
|                    | INDEP.   | MINUS                                 | =                |
|                    | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |                                       |                  |

#### SMALL ENTITY

| RATE                        | ADDIT. FEE |
|-----------------------------|------------|
| X5=                         | \$         |
| X15=                        | \$         |
| +50=                        | \$         |
| <b>TOTAL<br/>ADDIT. FEE</b> | <b>\$</b>  |

#### OTHER THAN A SMALL ENTITY

| RATE         | ADDIT. FEE |
|--------------|------------|
| X10=         | \$         |
| X30=         | \$         |
| +100=        | \$         |
| <b>TOTAL</b> | <b>\$</b>  |

|                    | (1)  | (2)                                   | (3)              |
|--------------------|--|---------------------------------------|------------------|
| <b>AMENDMENT B</b> | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                          | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|                    | TOTAL  | MINUS                                 | =                |
|                    | INDEP.   | MINUS                                 | =                |
|                    | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |                                       |                  |

| RATE                        | ADDIT. FEE |
|-----------------------------|------------|
| X5=                         | \$         |
| X15=                        | \$         |
| +50=                        | \$         |
| <b>TOTAL<br/>ADDIT. FEE</b> | <b>\$</b>  |

| RATE         | ADDIT. FEE |
|--------------|------------|
| X10=         | \$         |
| X30=         | \$         |
| +100=        | \$         |
| <b>TOTAL</b> | <b>\$</b>  |

|                    | (1)  | (2)                                   | (3)              |
|--------------------|--|---------------------------------------|------------------|
| <b>AMENDMENT C</b> | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                          | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|                    | TOTAL  | MINUS                                 | =                |
|                    | INDEP.   | MINUS                                 | =                |
|                    | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |                                       |                  |

| RATE                        | ADDIT. FEE |
|-----------------------------|------------|
| X5=                         | \$         |
| X15=                        | \$         |
| +50=                        | \$         |
| <b>TOTAL<br/>ADDIT. FEE</b> | <b>\$</b>  |

| RATE         | ADDIT. FEE |
|--------------|------------|
| X10=         | \$         |
| X30=         | \$         |
| +100=        | \$         |
| <b>TOTAL</b> | <b>\$</b>  |

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1.